

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U- <u>9590</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Carl</u> <u>R</u> <u>Wilson</u> P.O. Box, Bldg., Room No., if any _____ Street <u>1161 Rosemeadow Loop</u> City <u>Slidell</u> State <u>Louisiana</u> ZIP Code +4 <u>70460</u>	4. Name, file number, and address of labor organization. Name <u>Asbestos Workers Local Union #53</u> Labor Organization File Number <u>011373</u> P.O. Box, Building and Room Number, if any: Room <u>200</u> Street <u>2001 Veterans Memorial Blvd.</u> City <u>Kenner</u> State <u>Louisiana</u> ZIP Code +4 <u>70062-5466</u>
5. Position in labor organization. <u>Taft Hartley Funds Union Trustee</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name _____ Trade Name, if any: _____ P.O. Box, Bldg., Room No., if any _____ Street _____ City _____ State _____ ZIP Code +4 _____	7.a. Nature of Interest, Transaction, or Income. _____ 7.b. Amount. _____

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>[Signature]</u>	On <u>8-11-05</u> Date	<u>985-643-2312</u> Telephone Number

Name of Person Filing Carl Wilson	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name Asbestos Workers Local Union#53 Welfare Fund</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any 201</p> <p>Street 2001 Veterans Memorial Blvd.</p> <p>City Kenner</p> <p>State Louisiana ZIP Code + 4</p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name:</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any:</p> <p>Street:</p> <p>City:</p> <p>State: ZIP Code + 4:</p>	<p>11.a. Nature of such dealing.</p> <p>The Local Union negotiates a Collective Bargaining Agreement with several area contractors. Through the CBA, contributions are paid by the signatory contractors to the Fund on behalf of covered employees. 2004 annual contributions</p> <p>11.b. Approximate dollar value of such dealing. \$964,167</p> <p>12.a. Nature of interest held or income received.</p> <p>Registration fee to IP conference 12/01/2004-12/04/2004-\$915</p> <p>Lost Time wages for attending IP conference and trustees meetings-\$496</p> <p>Reimbursement expenses IP Conference-\$154</p> <p>12.b. Amount. \$1,565</p>

<p>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name:</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any:</p> <p>Street:</p> <p>City:</p> <p>State: ZIP Code + 4:</p>	<p>14.a. Nature of payment.</p>
<p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment.</p>

Name of Person Filing Carl Wilson

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

B. Name and address of Business (including trade name, if any).

Name Asbestos Workers Local Union#53 Pension Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any 201

Street 2001 Veterans Memorial Blvd.

City Kenner

State Louisiana ZIP Code + 4 70062-5466

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

The Local Union negotiates a Collective Bargaining Agreement with several area contractors. Through the CBA, contributions are paid by the signatory contractors to the Fund on behalf of covered employees. 2004 annual contributions

11.b. Approximate dollar value of such dealing. \$1,018,973

12.a. Nature of interest held or income received.

Lost Time wages for attending trustee's meetings

12.b. Amount. \$372

Name of Person Filing Carl Wilson

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Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Asbestos Workers Local #53 JAC

Trade Name, if any:

P.O. Box, Bldg., Room No., if any 200

Street 2001 Veterans Memorial Blvd.

City Kenner

State Louisiana

ZIP Code + 4 70062-5466

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

The Local Union negotiates a Collective Bargaining Agreement with several area contractors. Through the CBA, contributions are paid by the signatory contractors to the Fund on behalf of covered employees. 2004 annual contributions

11.b. Approximate dollar value of such dealing.

\$54,675

12.a. Nature of interest held or income received.

See Attached explanation

12.b. Amount.

\$3,085

I received lost time pay for attending Joint Apprenticeship Committee Meetings on 8/19, & 11/21 as a union trustee representative.

I received lost time pay for the instructing classes for the Joint Apprenticeship Program on 3/12, 5/24, & 6/7.

I received lost time pay, travel expense, meals, lodging, and registration fees for attending the International Apprenticeship Conference held in Pittsburgh, PA. June 28 – July 3 as a delegate for the Joint Apprenticeship Committee.

I have no interest in or receive income from the Joint Apprenticeship Committee.